STATEMENT OF

FORM 1	ORGANIZ. (See instruction			Office use only
1. NAME OF COMMITTEE (in t	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Citizens for To	om Petri			
ADDRESS (number and s	PO Box 270			
(Check if address is changed)				
	Fond Du Lac		<u> </u> WI	54936 0270
		CITY▲	STATE	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e	-mail address)		
(Check if address is changed)				
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
(Check if address is changed)				
 DATE M M M M O 5 FEC IDENTIFICA IS THIS STATEM 	25 2011 TION NUMBER	C C00107003	·	
4. IOTHIOGRATEM	LIVI LIVI (IV) OII	AMILIADED (A	vy	
I certify that I have exami	ned this Statement and to the best of my kn	owledge and belief it is true, corr	ect and complete	
Type or Print Name of	Treasurer Louis Andrew,	Jr.		
Signature of Treasurer	Electronically Filed by Louis An	drew, Jr.	Date 06	02 / 2011
NOTE: Submission of fal	se, erroneous, or incomplete information ma	ay subject the person signing this	•	
Office Use Only		For further informa Federal Election Cor Toll Free 800-424-9	mmission 530	FEC FORM 1 (Revised 02/2009)